## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000126694

Entity Name: LUIS C. FAVILLI, M.D., LLC

**Current Principal Place of Business:** 

3650 INNOVATION DR LAKELAND. FL 33812

**Current Mailing Address:** 

6675 WESTWOOD BLVD, SUITE 475 ORLANDO, FL 32821 US

FEI Number: 59-3591868 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: BRIAN MUELLER - ASSISTANT SECRETARY

03/05/2019

FILED Mar 05, 2019

**Secretary of State** 

1527748117CC

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

TitleBOARD MEMBERTitleBOARD MEMBERNameLIEBERMANN, ETHANNameCARTER, MARK

Address 200 CLAREDON STREET Address 200 CLAREDON STREET

56TH FLOOR 56TH FLOOR

City-State-Zip: BOSTON MA 02116 City-State-Zip: BOSTON MA 02116

Title CEO Title CFO

Name ALBRIGHT, CRAIG Name CREMATA, ARMANDO

Address 6675 WESTWOOD BLVD, Address 6675 WESTWOOD BLVD,

SUITE 475 SUITE 475

City-State-Zip: ORLANDO FL 32821 City-State-Zip: ORLANDO FL 32821

TitleCONTROLLERTitleCHIEF MEDICAL OFFICERNameTHOMPSON, LOGANNameRODRIGUEZ, DR. SARAHAddress6675 WESTWOOD BLVD,Address6675 WESTWOOD BLVD,

Addless 0073 WEST WOOD BLVD, Addless 0073 WEST WOOD BLVD,

SUITE 475 SUITE 475

City-State-Zip: ORLANDO FL 32821 City-State-Zip: ORLANDO FL 32821

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LOGAN THOMPSON

**AUTHORIZED PERSON** 

03/05/2019